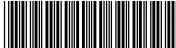



| | | |
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| Index of Claims  | Application/Control No. 10566747 | Applicant(s)/Patent Under Reexamination DOKIC-GALLAGHER, JASMINA |
| | Examiner DANIELLE SULLIVAN | Art Unit 1616 |

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|---|-----------------|---|-------------------|---|---------------------|---|-----------------|
| ✓ | Rejected | - | Cancelled | N | Non-Elected | A | Appeal |
| = | Allowed | ÷ | Restricted | I | Interference | O | Objected |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant | | | | <input type="checkbox"/> CPA | | | | <input type="checkbox"/> T.D. | | | | <input type="checkbox"/> R.1.47 | | | |
|--|----------|------------|------------|------------------------------|--|--|--|-------------------------------|--|--|--|---------------------------------|--|--|--|
| CLAIM | | | DATE | | | | | | | | | | | | |
| Final | Original | 01/16/2009 | 08/14/2009 | | | | | | | | | | | | |
| | 1 | ✓ | - | | | | | | | | | | | | |
| | 2 | ✓ | - | | | | | | | | | | | | |
| | 3 | ✓ | - | | | | | | | | | | | | |
| | 4 | ✓ | - | | | | | | | | | | | | |
| | 5 | ✓ | - | | | | | | | | | | | | |
| | 6 | ✓ | - | | | | | | | | | | | | |
| | 7 | ✓ | - | | | | | | | | | | | | |
| | 8 | ✓ | - | | | | | | | | | | | | |
| | 9 | - | - | | | | | | | | | | | | |
| | 10 | - | - | | | | | | | | | | | | |
| | 11 | - | - | | | | | | | | | | | | |
| | 12 | - | - | | | | | | | | | | | | |
| | 13 | - | - | | | | | | | | | | | | |
| | 14 | ✓ | - | | | | | | | | | | | | |
| | 15 | - | - | | | | | | | | | | | | |
| | 16 | ✓ | - | | | | | | | | | | | | |
| | 17 | ✓ | - | | | | | | | | | | | | |
| | 18 | ✓ | - | | | | | | | | | | | | |
| | 19 | ✓ | - | | | | | | | | | | | | |
| | 20 | ✓ | - | | | | | | | | | | | | |
| | 21 | - | - | | | | | | | | | | | | |
| | 22 | ✓ | - | | | | | | | | | | | | |
| | 23 | ✓ | - | | | | | | | | | | | | |
| | 24 | ✓ | - | | | | | | | | | | | | |
| | 25 | ✓ | - | | | | | | | | | | | | |
| | 26 | - | - | | | | | | | | | | | | |
| | 27 | - | - | | | | | | | | | | | | |
| | 28 | ✓ | - | | | | | | | | | | | | |
| | 29 | | ✓ | | | | | | | | | | | | |
| | 30 | | ✓ | | | | | | | | | | | | |
| | 31 | | ✓ | | | | | | | | | | | | |
| | 32 | | ✓ | | | | | | | | | | | | |
| | 33 | | ✓ | | | | | | | | | | | | |
| | 34 | | ✓ | | | | | | | | | | | | |
| | 35 | | ✓ | | | | | | | | | | | | |
| | 36 | | ✓ | | | | | | | | | | | | |

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| Index of Claims  | Application/Control No. 10566747 | Applicant(s)/Patent Under Reexamination DOKIC-GALLAGHER, JASMINA |
| | Examiner DANIELLE SULLIVAN | Art Unit 1616 |

| | | | | | | | |
|---|-----------------|---|-------------------|---|---------------------|---|-----------------|
| ✓ | Rejected | - | Cancelled | N | Non-Elected | A | Appeal |
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| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant | | | | <input type="checkbox"/> CPA | | | | <input type="checkbox"/> T.D. | | | | <input type="checkbox"/> R.1.47 | | | |
|--|----------|------------|------------|------------------------------|--|--|--|-------------------------------|--|--|--|---------------------------------|--|--|--|
| CLAIM | | DATE | | | | | | | | | | | | | |
| Final | Original | 01/16/2009 | 08/14/2009 | | | | | | | | | | | | |
| | 37 | | ✓ | | | | | | | | | | | | |
| | 38 | | ✓ | | | | | | | | | | | | |
| | 39 | | ✓ | | | | | | | | | | | | |
| | 40 | | ✓ | | | | | | | | | | | | |
| | 41 | | ✓ | | | | | | | | | | | | |
| | 42 | | ✓ | | | | | | | | | | | | |
| | 43 | | ✓ | | | | | | | | | | | | |
| | 44 | | ✓ | | | | | | | | | | | | |
| | 45 | | ✓ | | | | | | | | | | | | |
| | 46 | | ✓ | | | | | | | | | | | | |
| | 47 | | ✓ | | | | | | | | | | | | |
| | 48 | | ✓ | | | | | | | | | | | | |
| | 49 | | ✓ | | | | | | | | | | | | |
| | 50 | | ✓ | | | | | | | | | | | | |
| | 51 | | ✓ | | | | | | | | | | | | |
| | 52 | | ✓ | | | | | | | | | | | | |
| | 53 | | ✓ | | | | | | | | | | | | |